

Credential Application

Remit to:
 State of Wisconsin
 Department of Commerce-
 Credentialing
 P.O. Box 78780
 Milwaukee WI 53293-0780
 Phone (608) 261-8500
 TDD #: (608) 264-8777
 7:45 a.m. - 4:30 p.m.

Personal information you provide may be used for secondary purposes [Privacy Law, s. 15.04(1)(m)].

**THE CREDENTIAL WILL NOT BE
 PROCESSED UNLESS YOU:**

- A. Sign and date this form;
- B. Submit a complete application with all blanks filled in or marked non-applicable;
- C. Attach the specified fee; and
- D. Attach documents if specified on this application.

Instructions: Please review the pre-printed information in the boxed portions of this application. Clearly print corrections or new information where needed. Please use a color of ink other than black. **Be certain to sign and date the application.** The applicant's social security number is mandatory information. **Make a photocopy of the completed application for your records.**

By signing below, the applicant swears that all information provided on this application is true, accurate and that the credential requirements are met. **Notice: Information collected may be used for participation surveys, eligibility for approvals, law enforcement (including child support and tax delinquency enforcement) purposes and other secondary purposes. The Department may also provide this information to requesters pursuant to Wisconsin's open records law, ss. 19.31-19.39 stats. Social security numbers are required when applying for a license according to Wisconsin Stats. But they may not be disclosed to anyone except other State of Wisconsin governmental agencies.**

| Applicant's Signature | Date (mo/day/yr) |
|---|------------------|
| Applicant Information | |
| Applicant's Social Security No: | |
| Applicant's Name (First, Middle and Last): | |
| Address No. & Street, or P.O. Box: | |
| City, Town or Village, State, Zip + 4 Code: | |
| Country, If Other Than United States: | |
| Telephone No. (include area code): | |
| If Available, Fax No. (include area code): | |
| If Available, Internet Address: | |

UDC-HVAC INSPECTOR CERTIFICATION

Application and Exam Fee (nonrefundable): \$30.00 class code 7655

Make checks payable to: Department of Commerce. The fee consists of a \$10 application fee and an exam fee of \$20. When the exam is passed, the applicant will be asked to pay a \$30 credential fee which will be prorated because the credential expires on a specific date. The credential, which will be issued after the exam is passed and the prorated credential fee paid, will be effective for 4 years from June 30th. Office location: 201 W. Washington Ave, Madison. Mailing address: PO Box 7082, Madison, WI 53707.

Reason for Credential: Pursuant s. 101.66 (2), Stats., no person may conduct the inspection of one- and 2-family dwellings for the purpose of administering and enforcing ch. Comm 23 unless the person holds a credential issued by the department as a certified UDC-HVAC inspector.

Requirements of Credential: A person who inspects one- and 2-family dwellings as a certified UDC-HVAC inspector shall:

- Maintain a record of the inspections made relative the date and the findings of the inspections;
- Provide a copy of the inspection report to the property owner or his or her agent, and
- Make available to the department upon request his or her inspection records.

A person who holds the credential shall carry on his or her person the credential issued by the department while performing or conducting the activity or activities permitted under the credential.

APPLYING FOR UDC HVAC INSPECTOR CERTIFICATION

A person may obtain a credential as a certified UDC HVAC inspector by either one of the following:

Method 1 Taking and passing the UDC HVAC inspector certification examination.

Method 2 Submitting evidence of holding a current certification as a:
Commercial Building Inspector or
HVAC Qualifier

Apply for the credential by following the instructions for either method 1 or method 2.

METHOD 1 - Examination

Qualifications for Examination: In order to obtain the credential the applicant must obtain a score of at least 70% on an examination. The exam will cover chapters Comm 5 and Comm 20, 22, and 23, Wisconsin Administrative Code; 2003 Uniform Dwelling Code (UDC) Appendix. (If using the Code and Commentary, use the 2004 edition.) This exam is open book. Copies of current Wisconsin Administrative Code books may be obtained from Document Sales @ (608) 266-3358 or @ (800) 362-7253.

The Division offers an explanatory UDC Code and Commentary that may be used to study for the exam. It also may be ordered from Document Sales @ (608) 266-3358 or @ (800) 362-7253. It is intended to be a training guide and may not match the current code.

To schedule an exam:

- In the table below circle the month you would like to take the exam and the city in which you would like to take the exam. Record a telephone number where you can be reached during the day in case the exam center is filled for that date. The department will attempt to call and offer exams at available sites or dates.
- Submit the **FEE AND THIS APPLICATION** with the month and city circled for the exam to the division **at least 30 days in advance of the exam date chosen**. Note you may wish to keep a copy of this letter for your records.

| | | | |
|--|---|--|---|
| Exam Name: | This is a 3-hour exam and will be scheduled for the p.m. | | |
| Circle the exam location of your choice below. Then below the location, circle the day you would prefer to take the exam. | | | |
| 2006 Exam Schedule-Soil Testers at Every Site | | | |
| GREEN BAY <i>Howard Johnson Inn</i> 2580 S Ashland Ave 920-499-5121 | BLACK RIVER FALLS <i>Holiday Inn Express Hotel</i> W10170 Hwy 54 E 715-284-0888 | PEWAUKEE <i>Waukesha County Technical College</i> WCTC 800 Main St 262-695-3474 | HAYWARD <i>Hayward Inn & Suites</i> 10290 Hwy 27 S (715) 634-4100 |
| August 15 | | August 1 | |
| | September 19 | September 13 | |
| October 10 | | October 3 | October 18 |
| | November 14 | November 7 | |
| | | December 5 | |

Day phone number:

| 2007 Exam Schedule-Soil Testers at Every Site | | | | |
|--|---|---|---|---|
| GREEN BAY <i>Regency Suites Hotel</i> 333 Main St 920-432-4555 Wednesdays | MADISON <i>Radisson Hotel</i> 517 Grand Canyon Dr. 608-833-0100 Tuesdays | BLACK RIVER FALLS <i>Holiday Inn Express Hotel</i> W10170 Hwy 54 E 715-284-0888 Wednesdays | PEWAUKEE <i>Waukesha County Technical College WCTC</i> 800 Main St 262-695-3474 Wednesdays | HAYWARD <i>Hayward Inn & Suites</i> 10290 Hwy 27 S 715-634-4100 Wednesdays |
| | | January 10 | January 17 | |
| February 21 | | February 7 | February 14 | |
| | | March 7 | March 14 | |
| April 11 | April 24 | April 4 | | April 18 |
| | | May 9 | May 16 | |
| June 6 | | June 13 | June 20 | |
| | | July 11 | July 18 | |
| August 8 | August 21 | August 15 | | |
| | | September 12 | September 19 | |
| October 3 | | October 10 | October 17 | October 24 |
| | | November 7 | November 14 | |
| | December 11 | | | |

Day phone number:

A letter confirming the exact date, time and location will be sent to you.

Education Hours Required to Renew: The renewal of a credential as a certified UDC-HVAC inspector which has an expiration date after June 30, 2006, shall be contingent upon the inspector obtaining at least 24 hours of acceptable continuing education by March 30th of the year the credential expires. A person who holds a credential as a certified UDC-HVAC inspector may apply to the department for waiver of the continuing education requirements on the grounds of prolonged illness or disability or similar circumstances. Each application for waiver shall be considered individually on its merits by the department.

METHOD 2 – Proof of Current Licensure

The fee for applying for the credential using method 2 is as specified in the following table:

| Month Application is mailed | Fee | Month Application is mailed | Fee | Month Application is mailed | Fee |
|-----------------------------|---------|-----------------------------|---------|-----------------------------|---------|
| January | \$36.25 | May | \$33.75 | September | \$38.75 |
| February | \$35.63 | June | \$33.13 | October | \$38.13 |
| March | \$35.00 | July | \$40.00 | November | \$37.50 |
| April | \$34.38 | August | \$39.38 | December | \$36.88 |

Record the amount of the fee you will be sending in the box below:

Fee Submitted (nonrefundable):

\$

class code 7655

Make checks payable to: Department of Commerce. The credential will be effective for 4 years from June 30th. Office location: 201 W. Washington Ave, Madison. Mailing address: PO Box 7082, Madison, WI 53707.

ATTACH to this form a copy of current certification as a Commercial Building Inspector or HVAC Qualifier.